PTO/SB/17 (12-04v2) Approved for use through 7/31/2006. OMB 0651-0032

| OIPE         | )   |  | 1005 no norsen are r  | oguired to | U.S. Paten  | t and Tradema | rk Office; U.S. DE       | PARTMENT O   | F COMMERCE   |  |
|--------------|---|--|-----------------------|------------|---|---------------|--------------------------|--------------|--------------|--|
| O'' - 40     | Effective on 12/08/2004.  Poes pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).  FEE TRANSMITTAL                                    |  |                       |            | respond to a collection of information unless it displays a valid OMB control number<br>Complete if Known |               |                          |              |              |  |
| 2000         |   |  |                       |            |   |               | 10/629,756-Conf. #006804 |              |              |  |
| JUN 0 1 2006 |   |  |                       |            | 7.000.000.000.000   |               | July 30, 2003            |              |              |  |
| 4            |   |  |                       |            |   |               | Takayuki HATTORI         |              |              |  |
|              | For FY 2005   |  |                       |            |   |               | R. A. Sergent            |              |              |  |
| L THADEMAN   | Applicant claims small entity status. See 37 CFR 1.27   |  |                       |            |   |               | 1711                     |              |              |  |
|              | TOTAL AMOU  | INT OF PAYMENT   | (\$) 1,810.0          | 00         | Attorney Docket   | No. 2         | 927-0152P                |              |              |  |
|              |   |  | <u> </u>              |            |   |               |                          |              |              |  |
|              | METHOD OF PAYMENT (check all that apply)  X Check Credit Card Money Order None Other (please identify):   |  |                       |            |   |               |                          |              |              |  |
|              | 1 🖳 🕓   | X   Check   Credit Card   Money Order   None   Other (please identify):                                |                       |            |   |               |                          |              |              |  |
|              |   |  |                       |            |   |               |                          |              |              |  |
|              |   | For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) |                       |            |   |               |                          |              |              |  |
|              | Charge fee(s) indicated below  Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17  Charge fee(s) indicated below, exce |  |                       |            |   |               |                          |              |              |  |
|              |   |  |                       |            |   |               |                          |              |              |  |
|              | FEE CALCULATION   |  |                       |            |   |               |                          |              |              |  |
|              | 1. BASIC FILIN  | IG, SEARCH, AND E  | XAMINATION FE         | ES         |   |               |                          |              |              |  |
|              |   | FI   | LING FEES             | SEA        | ARCH FEES   | EXAMIN        | ATION FEES               |              |              |  |
|              | Application T   | ype <u>Fee (</u> \$  | Small Entity Fee (\$) | Fee (\$)   | Small Entity<br>Fee (\$)  | Fee (\$)      | Small Entity<br>Fee (\$) | Fees F       | Paid (\$)    |  |
|              | Utility   | 300  |                       | 500        | 250   | 200           | 100                      |              |              |  |
|              | Design  | 200  |                       | 100        | 50  | 130           | 65                       |              |              |  |
|              | Plant   | 200  |                       | 300        | 150   | 160           | 80                       | -            |              |  |
|              |   | 300  |                       | 500        | 250   | 600           | 300                      |              |              |  |
|              | Reissue   | 200  |                       | 0          | 0   | 0             | 0                        |              |              |  |
|              | Provisional   |  | 100                   | U          | Ū   | Ū             | Ŭ                        |              | Small Entity |  |
|              | 2. EXCESS CL  |  |                       |            |   |               |                          | Fee (\$)     | Fee (\$)     |  |
|              | Fee Description Each claim ove  | !<br>er 20 (including Reiss  | sues)                 |            |   |               |                          | 50           | 25           |  |
|              | 1   | ent claim over 3 (incl   |                       |            |   |               |                          | 200          | 100          |  |
|              | Multiple depen  |  | ,                     |            |   |               |                          | 360          | 180          |  |
|              | • •   |  |                       |            |   |               | Itiple Depende           | ent Claims   |              |  |
|              | 19 -20 = 0 x =  |  |                       |            |   | <u>Fee</u>    | : (\$)                   | Fee Paid (\$ | <u>.)</u>    |  |
|              |   | <del></del>  |                       |            |   |               |                          |              |              |  |
|              | Indep. Claims   | Extra Claims 0   | x Fee (\$) =          | Fee F      | aid (\$)  |               |                          |              |              |  |
|              | 3. APPLICATION  | ON SIZE FEE  |                       |            |   |               |                          |              |              |  |
|              | If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer                                     |  |                       |            |   |               |                          |              |              |  |
|              | listings und  | der 37 CFR 1.52(e)),   | the application si    | ze fee du  | e is \$250 (\$125 t   | for small en  | tity) for each a         | ditional 50  | )            |  |
|              |   | raction thereof. See   |                       |            |   |               | Fan (\$)                 | Eoo I        | Paid (\$)    |  |
|              | Total Sheet   |  |                       |            | dditional 50 or fra   |               | -                        | <u>ree r</u> | -aiu (\$)    |  |
|              | - 100 = /50 (round up to a whole number) x = =   4. OTHER FEE(S) Fees Paid (\$)   |  |                       |            |   |               |                          |              |              |  |
|              | Non English Specification \$130 fee (no small entity discount)  |  |                       |            |   |               |                          |              |              |  |
|              | Other (e.g. late filing surcharge): 1801 Request for continued examination (RCE) (see 37 790.00   |  |                       |            |   |               |                          |              |              |  |
|              | 1253 Extension for response within third month 1,0  |  |                       |            |   |               |                          |              | 20.00        |  |
|              | SUBMITTED BY // M   |  |                       |            |   |               |                          |              |              |  |
|              | Signature   | 1///   | ,                     |            | Registration No.<br>(Attorney/Agent)  | 32,868        | Telephone                | (703) 20     | 5-8000       |  |
|              | Name (Print/Type)   | Andrew D. Melkie   |                       |            | (Automey/Agent)   |               | Date                     | June 1,      |              |  |
|              | Liame (Finiting)  | 7 didiew D. Ivielkie   | <del>-</del>          |            |   | ·             |                          |              |              |  |
|              |   |  |                       |            |   |               |                          |              |              |  |